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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

| | | | |
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| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 10/759,464 | |
| | Filing Date | January 19, 2004 | |
| | First Named Inventor | Christopher J. Mills | |
| | Art Unit | 3644 | |
| | Examiner Name | John W. Eldred | |
| Total Number of Pages in This Submission | | Attorney Docket Number | 7784-000684 |

ENCLOSURES (check all that apply)

| | | |
|--|--|---|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Letter citing errors of record; letter advising change of correspondence address and postcard. |
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Remarks

The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 08-0750. A duplicate copy of this sheet is enclosed.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | | |
|-------------------------|----------------------------------|---------------------------------|--------------------|
| Firm or Individual name | Harness, Dickey & Pierce, P.L.C. | Attorney Name Mark D. Elchuk | Reg. No. 33,686 |
| Signature | | | |
| Date | October 17, 2005 | | |

Certificate**OCT 26 2005****of Correction****CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

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HARNESSES
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October 17, 2005

Director of the U.S. Patent and Trademark Office
P.O. Box 1450
Alexandria, VA 22313-1450

Re: Patent No. 6,932,298
Issued: August 23, 2005
Inventor: Christopher J. Mills
For: Modular Overhead Privacy System
Our Reference: 7784-000684

Sir:

We have noted in proofreading Patent No. 6,932,298 the following error:

Column 3, line 56, first and second occurrence (application page 5, line 28, first and second occurrence), "births" should be --berths--.

Kindly make this error of record in your file.

Very truly yours,

Mark D. Elchuk
Reg. No. 33,686

MDE/sed

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